June 8, 1956

## Dear George:

As requested, we have reviewed the matter of medical care and treatment of our people overseas and our thoughts are summarized below.

- 1. The responsibility of providing medical care and treatment is on the Government. Its medical officer or staff must not decline to treat our people. This seems particularly evident respecting isolated locations. Any reluctance on their part to give prompt and appropriate treatment because of questions of possible liability should be eliminated somehow by the Government. Might that be done by providing them with malpractice insurance or its equivalent? Also, you may be able to utilize to advantage in this connection the fact that our people are documented as Air Force civilians.
- 2. In some situations and circumstances it presumably will be appropriate, and in some cases may be necessary, to utilize outside doctors and facilities. In instances in which adequate outside medical facilities are immediately and easily available and when the person is not incapacitated, such facilities could be chosen by the person. If he is incapacitated it would seem that the Government medical officer would have to determine the appropriate facility and see to it that the needed care and treatment is provided. In emergent situations and at isolated locations there may wall be cases in which the man must be partially treated by the resident staff and flown to an appropiate facility.
- A paramount consideration is the need to provide necessary medical care promptly, whether it be a case in which such care must be given or arranged by the medical officer or a case in which it is feasible to provide it by giving prompt permission to the person to choose an outside doctor or facility.
- 4. Respecting the question of what insurance coverage exists to pay for medical care from a commercial facility, occupational injuries are covered by Workmens Compensation Insurance and nonoccupational injuries or illnesses are covered by Group Insurance (in the latter case general treatment by a doctor is covered only after 3rd visit). To the extent that commercial facilities are used, it will be necessary for project offices to supply a cash advance. Our manager with the detachment will send us a report in such cases from which we will determine the nature of the insurance claim to be filed and we will then instruct him how to prepare the claim form. To such extent as reimburgement is not

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available by insurance for necessary medical service rendered by a private facility (for example, if security prevents filing claim) the amount involved would become a charge to be reimbursed under SC-56, thus liquidating the advance. To the extent that reimbursement is received from the insurance claims, such money would be used to liquidate the advance.

We hope the foregoing will be helpful and will be glad to hear from you as to your further thoughts on the matter.

Yours,

Bob

3AFC-7396 Copy 2 of 5 28 June 1956

TO : Project Contracting Officer

SUBJECT: Report Concerning the Review of Cash Transactions with Lockheed Aircraft Corporation

- l. Transmitted herewith for your information and completion of the contracting officers record, is the original of a report titled, "Review of Special Cash Transactions Pertaining to Contract SP-1913 and Related Contracts." This release bears SAPC #7367.
- 2. For the sake of the record you are advised the memorandum copy of the report as well as the transmittal memorandum, dated June 21, 1956, is on file in the Office of the Project Comptroller in Contract Number SP-1913.

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Attachments:	a/s	
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